

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>WJ</i>		3/28/00
O.I.P.E. CLASSIFIER		49652	05/15/00
FORMALITY REVIEW			06/07/00
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral)..... Canceled
 + Restricted
 N Non-elected
 I Interference
 A Appeal
 O Objected

Best Available Copy

Claim	Date
1	Final Original
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Claim	Date
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If more than 150 claims or 10 actions
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Best Available Copy

INDEX OF CLAIMS

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Claim	Date	Claim	Date	Claim	Date
Final	Original	Final	Original	Final	Original
1		151	51	195	2
2		152	52	196	2
3		153	53	197	2
4		154	54	198	2
5		155	55	199	2
6		156	56	200	2
7		157	57	201	2
8		158	58	202	2
9		159	59	203	2
10		160	60	204	2
11		161	61	205	2
12		162	62	206	2
13		163	63	207	2
14		164	64	208	2
15		165	65	209	2
16		166	66	210	2
17		167	67	211	2
18		168	68	212	2
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25		175	75	219	2
26		176	76	220	2
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28		178	78	222	2
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44		194	94	144	
45		195	95	145	
46		196	96	146	
47		197	97	147	
48		198	98	148	
49		199	99	149	
50		200	100	150	

If more than 150 claims or 10 actions
staple additional sheet here

43			
46			
47			
48	✓	✓	✓
49	✓	✓	✓
50	✓	✓	✓

95			
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98	✓	✓	✓
99	✓	✓	✓
100	✓	✓	✓

145			
146			
147			
148	✓	✓	✓
149	✓	✓	✓
150	✓	✓	✓

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